

## Sidewalk Café Permit Application

Return completed application, supporting documentation, and application fee to: City of New Bedford-Planning Department Room 303 at City Hall. For assistance, Please call (508) 979-1488

Applicant Information			,		
				Permit Type	
Date:				_	
Restaurant'Owner: SANORA ROBZICUES				New Permit (\$25)	
Restaurant Address: 418-420 Fivet ST				W/alcohol (\$50)	
Telephone: 506-9840000	Fax:	Chaire A		ES Walconor (550)	
Requested Number of Outdoor:	Tables: 10	Chairs: <b>3</b> :	<u> </u>		
Required Materials (Applicat	ions will not be acc	epted withou	ut the foll	lowing)	
Copy of a valid restaurant li	icense.	÷			
☐ Copy of a current certificate	e of insurance, naming	g the City of N	ew Bedfor	d as additional insured.	
A layout, drawn to scale on sidewalk area and adjacent number of tables, chairs, st meters, bus shelters, sidew either existing or proposed,	private property, the eps, planters, and um alk benches, trash rec	proposed loca brellas, location eptacles, and	ation of the	e sidewalk café, size and ways, trees, parking	
Photographs, drawings, or all tables, chairs, umbrellas					
☐ Signed Hold Harmless Agree	ement				
☐ A Non-refundable application fee					
☐ New permit - \$25					
New Permit W/alcohol expa	nsion \$50				
If this application is approved, I have installation of sidewalk cafes. City Code of Ordinances.					
Signature – Restaurant Owner	SandeRo	de	<del>.</del>		
Official Use Only	,				
Review date:	All materials subm	itted:	ves	Liquor License:	
Signature:	<del>_</del>	Fee:		·	





